



YOUTH CAMP INSPECTION FORM

CAMP ID # _____ NAME OF CAMP _____ LOCATION AT TIME OF INSPECTION _____ NUMBER OF CAMPERS YOUNGER THAN 18 ON DATE OF INSPECTION _____	NUMBER OF TRAINED SUPERVISORS 18 OR OLDER ON DATE OF INSPECTION _____ DATES CAMP OPEN 4 DAYS OR MORE LISTED ON APPLICATION YES/NO _____ OR PROVIDED DURING INSPECTION YES/NO _____. IF PROVIDE, PLEASE SUBMIT. INSPECTION DATE _____
--	--

MARK X FOR NON-COMPLIANCE (NC) OR NOT APPLICABLE (NA) ONLY.

	NC	NA		NC	NA
1. LICENSING					
a. Application submitted by May 1	—	—	i. Sleeping facilities adequate (1/person)	—	—
b. License issued	—	—	j. Bedding clean and in good repair	—	—
c. Timely response to previous deficiency letter	—	—	k. No Triple deckbeds in use	—	—
	—	—	l. Adequate number of toilets, lavatories, and showers	—	—
2. STAFF	—	—	m. Shower room floor washed daily with acceptable sanitizing agent	—	—
a. Qualified adult director	—	—	n. Restroom facilities clean and in good repair	—	—
b. Staff adequate (1/10 campers)	—	—	o. Privies meet TDH standards &/or TNRCC standards	—	—
c. Written personnel and practices policies regarding camp and staff available	—	—	p. Toilet tissue available	—	—
d. Staff members informed regarding personnel and camp practice policies	—	—	q. Soap and towels available	—	—
e. Written job descriptions on file	—	—	r. Hand washing facilities provided	—	—
f. Record of each staff member, character and qualifications on file	—	—	s. Lavatories and showers at permanent buildings provided with hot and cold water	—	—
	—	—	t. Toilet and bathing facilities adequately lighted and ventilated	—	—
3. SITE AND PHYSICAL FACILITIES	—	—		—	—
a. No serious fire, health, or safety hazards	—	—	4. PRIMITIVE OR WILDERNESS CAMP	—	—
b. Buildings comply with applicable codes	—	—	a. Campsite properly maintained, safe and sanitary	—	—
c. Buildings structurally sound	—	—	b. Handwash facilities provided.	—	—
d. Buildings clean and in good repair	—	—	c. Drinking water from acceptable source and free Cl ₂ residual maintained at 0.2 ppm or greater	—	—
e. Camp grounds well maintained	—	—	d. Primitive campsites in non-populous areas in compliance with approved disposal methods and setbacks.	—	—
f. Plans submitted for new construction	—	—			
g. Upper stories meet standards of TDH	—	—			
h. Living and sleeping quarters have openings to outside	—	—			

	NC	NA		NC	NA
d. Foods maintained in wholesome condition	—	—	f. Minimum of two persons on duty when swimming pool is in use	—	—
e. Proper sanitation provided for all food utensils	—	—	g. Adequate lifesaving equipment immediately available or worn as required	—	—
f. Responsible adult knowledgeable [experienced or training or certification (documented)] of wilderness camping techniques	—	—	h. Campers 12 years of age and under and non-swimmers wearing life preservers for watercraft activities	—	—
g. Solid wastes properly disposed	—	—	i. Swimming area clearly marked for nonswimmers, intermediates, and swimmers	—	—
5. MEDICAL AND NURSING CARE			j. Non-swimmers accompanied by a counselor in sailboat	—	—
a. Emergency transportation available at all times	—	—	k. All campers wearing life preservers while entering and while on white water, rough water or waterskiing	—	—
b. Licensed physician on call and documented on file	—	—	l. Boats and boating equipment in good repair	—	—
c. Written arrangement for emergency medical care	—	—	m. Swimming areas maintained in a safe and clean condition	—	—
d. Physician, R.N., L.V.N., or qualified First Aid (F.A.) attendant in camp	—	—	n. Swimmers tested and restricted to appropriate swim area	—	—
e. Standing orders for First Aid (F.A.) on file	—	—	o. Bathers checked in and out of water and/or buddy system used	—	—
f. Infirmary or first aid facility suitably equipped	—	—	p. No docking or waterskiing in swimming area	—	—
g. Communicable diseases isolated and supervised	—	—	q. Swimming conducted in a natural body of water ___ Yes ___ No	—	—
h. Bound medical log kept in infirmary	—	—	Name of body(s) of water	—	—
i. Serious accidents or illness, or deaths reported on camper illness and injury form and submitted in 10 days.	—	—	_____	—	—
j. Waterborne or food borne diseases reported immediately	—	—	_____	—	—
k. Health cards kept in infirmary available	—	—	7. SWIMMING POOLS		
l. Telephone or other communication device available	—	—	a. Swimming pools operated in accordance with State statutes and the Department's standards See attached Pool Inspection Form	—	—
m. Emergency procedures posted in infirmary	—	—	If not camp owned:	—	—
n. Emergency procedures reviewed in staff training	—	—	Name of Pool _____	—	—
o. Prescription and non-prescription drugs properly stored and dispensed	—	—	Pool Owner _____	—	—
p. First Aid (F.A.) kits and F.A. documentation taken on out-of-camp trips	—	—	Pool Location _____	—	—
6. WATERFRONT SAFETY			8. RECREATIONAL SAFETY AND EQUIPMENT		
a. Qualified adult waterfront director in charge of activity	—	—	a. Hazardous camp activity directly supervised by qualified adult	—	—
b. Waterfront director or qualified assistant directly supervising waterfront activity	—	—	b. Firearms program properly conducted	—	—
c. Waterfront policies strictly enforced	—	—	c. Firearms range meets specifications of NRA or equivalent	—	—
d. Waterfront staff not engaged in recreational activities while on duty	—	—	d. Archery program properly conducted	—	—
e. Adequate lifeguards to swimmer ratio (1/10 or 1/35)	—	—	e. Archery range meets specifications of NFAA or equivalent	—	—

	NC	NA		NC	NA
f. Ranges marked and fenced and off limits when not in use	—	—		—	—
g. Ropes course properly conducted	—	—		—	—
h. Horsemanship activity properly conducted	—	—		—	—
i. Recreational equipment in good condition and inspected as necessary	—	—		—	—
j. Firearms, ammunition, and archery and potentially hazardous equipment properly stored	—	—		—	—
k. Other potentially hazardous activities properly conducted	—	—		—	—
l. Tools properly maintained and used	—	—		—	—
9. FIRE PREVENTION			12. INSECT AND RODENT CONTROL		
a. Adequate and sufficient fire fighting equipment in good condition readily available	—	—	a. Buildings free from insects, rodents, and other vectors	—	—
b. Staff familiar with fire equipment	—	—	b. Hazardous chemicals properly marked and stored	—	—
c. Structures used in accordance with standards of Local or State Fire Marshal	—	—	13. FOOD SERVICE FACILITIES		
d. Exits conspicuously marked provided and ready	—	—	a. Operated in according with Rules on Food Service Sanitation, attached E-40	—	—
e. Disaster and/or evacuation procedure posted	—	—	b. Heimlich maneuver posted as required by Health & Safety 438.051, & TAC 229.173.	—	—
f. Staff trained and prepared for disaster and/or evacuation procedures	—	—	14. DRINKING WATER SYSTEM		
g. Campers instructed regarding disaster and evacuation procedures	—	—	All Water systems:		
h. Inflammables and explosives properly marked and stored	—	—	1. Submits a minimum of one bacteriological sample prior to camp opening and a minimum of one per month while camp is in session.		
i. Smoke alarms installed in all permanent sleeping areas	—	—	2. Bacteriological sample(s) satisfactory		
10. MAINTENANCE AND SAFE USE OF MOTOR VEHICLES			3. Free Chlorine level _____ ppm		
a. All vehicles for transporting children have a current valid safety sticker and must pass TDPS inspection. If used on private property and not stickered, is capable of passing TDPS inspection.	—	—	4. Minimum pressure 20 psi		
b. Vehicles properly equipped with first aid kit, etcetera	—	—	5. Chemical sample submitted.		
c. Drivers properly licensed	—	—	6. Other significant deficiencies (detail on page 4)		
d. Proper conveyances used on public roads	—	—	a. Public Water System, attach last inspection letter.		
11. FARM AND DOMESTIC ANIMALS			1. If camp operates TNRCC "public water system",		
a. Animal quarters properly separated and located	—	—	Name of the system _____		
b. Animal quarters properly maintained	—	—	TNRCC Water System ID# _____		
c. Animals not permitted in waterfront area	—	—	2. Significant deficiencies observed, recommend referral to TNRCC, ____ Yes ____ No (send carbon copy of deficiency letter to TNRCC&/or referred to:		
d. Animals vaccinated against rabies as required by state law	—	—	_____		

			Date: _____		
			b. TDH Regulated Youth Camp Water Systems Not a Public TNRCC system(See Health & Safety Code Title 25.Part I.Chap. 265.Sect. 51-61 for additional requirements.) Significant deficiencies observed.		

			15. SOLID WASTE		
			a. The conditions of collection, storage and disposal of solid waste are a public health nuisance(s) [fly, rodents, contamination etc. controlled]		
			If other regulatory issues exist referral made to:		
			Who _____		
			Date _____		

